

OMB No. 3245-0213 OMB Expiration Date: 08/31/04

APPLICATION FOR POOL OF GUARANTEED INTEREST CERTIFICATES

Pool	l Assembler Name	e:			
	Address	:			
Pool	l Assembler Numl	ber:			
	l Assembler Tax I				
Inte	rest Rate Requeste		_		
Sche	eduled Maturity D	ate Requested or			
Pool	Cap and Floor:				
Pool	l Issue Date on Po	ol Certificates:			
Prop	osed Settlement I				
	aranteed Inter				
	Loan	Borrower	Originator	Scheduled	Balance as of Pool
	Number	Name	Fee	Maturity Date	Application Date
1					
2			_		
3					
4					
5			_		
6					
7			_		
8			_		
9					
10.					

Use additional sheets if necessary.

* Section 6109 of the Internal Revenue Code requires most recipients of dividend, interest or other payments to give taxpayer identification numbers to payers who must report the payments to the IRS. IRS uses the numbers for identification purposes.

SBA Form 1454 (7-98) Required to obtain benefit

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Please forward either (1) the Certificate of Beneficial Interest or (2) SBA Form 1086 and the Note for each loan to Colson Services Corp., P.O. Box 54, Bowling Green Station, New York, NY 10274, or if delivered by courier, to Colson Services Corp., 120 Broadway, 19th Floor, New York, NY 10271. Provide the name, address, taxpayer identification number, delivery instructions and amount for each pool certificate to be issued.

For each certificate, Pool Assembler must certify that buyer has received required disclosure information described in Section III.6-H of Secondary Market Program Guide. For each certificate, Pool assembler must submit to FTA information on items 1-5, except that it is not necessary to provide duplicate information where the information is the same for several certificates.

THE FTA SERVICING FEE IS 1/8_{TH} OF 1% PER ANNUM. THE POOL APPLICATION PROCESSING FEE IS \$30 PER GUARANTEED INTEREST INCLUDED IN THE POOL.

We certify to the following:

- 1. This entity meets all requirements for pool assembler (13 CFR 120.630) as of the date of application for this pool, and this pool meets all the requirements for loan pools (13 CFR 120.611).
- 2. The above listed loans are current as of the date of application.
- 3. We are authorized by our firm to submit this pool application (two signatures required).

Cianatuma	Cianatura
Signature	Signature
Name	Name
Title	

Please Note: The estimated burden for completing this form is 3 hours per response. You will not be required to respond to this information collection if a valid OMB approval number is not displayed. If you have questions or comments concerning this estimate or other aspects of this information collection, please contact the U.S. Small Business Administration, Chief, Administrative Information Branch, Washington, D.C. 20416 and/or Office of Management and Budget, Clearance Officer, Paperwork Reduction Project (3245-0213), Washington, D.C. PLEASE DO NOT SEND FORMS TO OMB.

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